



Clark County Department Of Building & Fire Prevention

4701 West Russell Road, Las Vegas, NV 89118 ~ (702) 455-3000

Commercial Sub-Permit Application

PERMIT TYPE (Select One Only)

☐

ELECTRICAL

☐

FIRE ALARM

☐

LOW VOLTAGE

☐

MECHANICAL

☐

PLUMBING

ASSESSOR PARCEL#: _____

JOB SITE ADDRESS: _____

PROJECT NAME: _____

GENERAL'S BUILDING PERMIT#: _____ SET UP BY: _____

TENANT NAME: _____ UNIT/SUITE#: _____

CONTACT NAME: _____ PHONE#: _____

CONTACT ADDRESS: _____

APPLICATION NO.:

DESCRIPTION OF WORK

☐

PLANS ATTACHED

☐

NO PLANS

CONTRACTOR INFORMATION

ST. LIC. NO.: _____ CLASS: _____

BUSINESS LIC. NO.: _____

CONTRACTOR NAME: _____

PHONE#: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CONTRACTOR'S DECLARATION

I hereby certify that I am licensed under the provisions of N.R.S. 624. I certify that I have read this application and state that the information provided is correct. I agree to comply with all County ordinances and state laws relating to building construction, and hereby authorize representatives of Clark County to enter the above referenced property for inspection purposes.

CONTRACTOR SIGNATURE _____

DATE _____

ELECTRICAL

PRICE / FEE

MECHANICAL

PRICE / FEE

PLUMBING

PRICE / FEE

Electrical Project Valuation \$ _____

OR

Percent of Building Permit
(Electrical Permit Fee – 18%) _____

Mechanical Project Valuation \$ _____

OR

Percent of Building Permit
(Mechanical Permit Fee – 15%) _____

Plumbing Project Valuation \$ _____

OR

Percent of Building Permit
(Plumbing Permit Fee – 16.5%) _____

COMMENTS

PERMIT FEES

Permit Fee: \$ _____

Plan Review Fee:

☐

25%

\$ _____

☐

35%

\$ _____

TOTAL FEE: \$ _____

☐

Cash

☐

Check No:

Issued By: _____ Date: _____

Zoning Review By: _____ Date: _____

Bldg Plan Review By: _____ Date: _____